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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) BUILDING A NATIONAL KNOWLEDGEABLE SECURITY PAC PO BOX 11463 ADDRESS (number and street) (Check if address is changed) FORT WAYNE 46858 IN CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS JLYONS@BANKSPAC.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00650267 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. LYONS, JEFFREY, R,, Type or Print Name of Treasurer LYONS, JEFFREY, R, , [Electronically Filed] 07 12 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		OMMITTEE	
Can	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate / Affiliation	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Com	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.	ected organization is a
		Corporation Corporation w/o Capital Stock	_abor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Comi	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.	FEC ID number C	

Title or Position TREASURER

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Write or Type Committee Nam	ue	•
BUILDING A N	ATIONAL KNOWLEDGEABLE	SECURITY PAC
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leadership PAC Sponsor
BANKS, JAMES, E, ,		
Mailing Address	238 S EAGLE GLEN TRL	
	COLUMBIA CITY	IN 46725
	CITY	STATE ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising	g Representative Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and posit	tion of the person in possession of committee
	JEFFREY, R, ,	1
Full Name	,2719 COVINGTON WOODS BLVD	
Mailing Address		
	FORT WAYNE	IN 46804
Title or Position	CITY	STATE ZIP CODE
TREASURER	Telephone nur	mber
3. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the assistant treasurer).	e committee; and the name and address of
Full Name LYONS, of Treasurer	JEFFREY, R, ,	
Mailing Address	2719 COVINGTON WOODS BLVD	
	FORT WAYNE	IN 46804 _ _

CITY

ZIP CODE

STATE

Telephone number

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Full Name of Designated Agent	COX, CASEY, , ,						
Mailing Address	2129 DODGE AVE						
	FORT WAYNE IN 468	05 ZIP CODE					
Title or Position ASSISTANT TRE							
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.							
Mailia - A ! !	OLD NATIONAL BANK						
Mailing Address							
	FORT WAYNE IN 468	02					
	CITY STATE	ZIP CODE					
Name of Bank, D	epository, etc.						
Mailing Address							